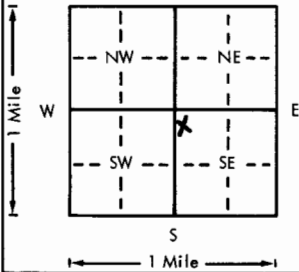


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

|  |  |   |  |   |   |              |
|--|--|---|--|---|---|--------------|
| 1. Location of well:   |  | County<br><b>Kingman</b><br><b>Sedgwick</b> | Fraction<br><b>1/4 NW 1/4 SE/4</b>   | Section number<br><b>19</b>   | Township number<br><b>T 30 S R 5W E/W</b> | Range number |
| 2. Distance and direction from nearest town or city:<br><b>3 W of Norwich, Ks.</b><br>Street address of well location if in city: <b>&amp; 2 1/2 South on the West</b> |  |   | 3. Owner of well:<br><b>Roy Fieser</b><br>Norwich, Kansas<br>City, state, zip code:  |   |   |              |
| 4. Locate with "X" in section below:<br>Sketch map:<br><b>side of the road.</b>  |  |   | 6. Bore hole dia. <b>11</b> in. Completion date <b>8-27-77</b><br>Well depth <b>1045</b>   |   |   |              |
|    |  |   | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary  |   |   |              |
|  |  |   | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                       |   |   |              |
| 5. Type and color of material  |  |   | 9. Casing: Material <b>styrene</b> Height: Above or below <b>114</b><br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.<br>RMP <b>5</b> <b>PVC</b> Weight <b>1045</b> lbs./ft.<br>Dia. <b>5</b> in. to <b>1045</b> ft. depth Wall Thickness: inches or<br>Dia. <b>5</b> in. to <b>1045</b> ft. depth Gauge No. <b>200</b> |   |   |              |
|  |  |   | 10. Screen: Manufacturer's name <b>Sunflower Plastic</b><br>Type <b>styrene</b> Dia. <b>5"</b><br>Slot/gauge <b>.06</b> Length <b>75'</b><br>Set between <b>30</b> ft. and <b>105</b> ft.<br>Gravel pack? <b>yes</b> Size range of material <b>1/4-1/8"</b>  |   |   |              |
| Topsoil  |  |   | 11. Static water level: <b>25</b> ft. below land surface Date <b>8-27-77</b>   |   |   |              |
| Fine Sand  |  |   | 12. Pumping level below land surfaces:<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>____ ft. after ____ hrs. pumping ____ g.p.m.<br>Estimated maximum yield ____ g.p.m.  |   |   |              |
| Red Shale  |  |   | 13. Water sample submitted: ____ mo./day/yr.<br>____ Yes ____ No Date ____   |   |   |              |
|  |  |   | 14. Well head completion: <b>12</b> capped<br>____ Pitless adapter ____ inches above grade   |   |   |              |
|  |  |   | 15. Well grouted? <b>yes</b> <b>1-2</b> fine sand m. x<br>With: ____ Neat cement ____ Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <b>40</b> ft. to <b>14</b> ft.   |   |   |              |
|  |  |   | 16. Nearest source of possible contamination: <b>Septic</b><br>ft. <b>100</b> Direction <b>North</b> Type <b>Tank</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ____ No   |   |   |              |
|  |  |   | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name ____<br>Model number ____ HP ____ Volts ____<br>Length of drop pipe ____ ft. capacity ____ g.p.m.<br>Type:<br>____ Submersible ____ Turbine<br>____ Jet ____ Reciprocating<br>____ Centrifugal ____ Other   |   |   |              |
| (Use a second sheet if needed)   |  |   |  |   |   |              |
| 18. Elevation:   |  | 19. Remarks:<br><b>Flat Ground</b>          |  | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report<br>is true to the best of my knowledge and belief.<br><b>Harp Well &amp; Pump</b> 236<br>Business name <b>Wichita, Kansas</b> License No. ____<br>Address <b>Mr. Arnold</b><br>Signed <b>Mr. Arnold</b> Date <b>10-25-77</b><br>Authorized representative |   |              |